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CONFIRMATION [V]

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Date: March 30, 2005 From: Craig A. Phillips

Total Number of Pages Including Cover Sheet: 26

Message:

RELYECTURE SONDED

Application No.: 09/913,118 - Filing Date: November 5, 2001 RE:

Applicant(s): Wolfgang Rasp et al.

Group Art Unit: 1713 Examiner: Peter D. Mulcahy

Title: Transparent Biaxially Oriented Polyolefin Film

Attorney Docket: 46613-00018

Reply To Office Action Dated September 30, 2004

Transmitted herewith are the following documents:

- 1) USPTO Transmittal Form (including Certificate of Facsimile Transmission) (1 page);
- 2) Fee Transmittal For FY 2005 (1 page);
- 3) Petition For Extension Of Time Under 37 CFR 1.136(a) (1 page in duplicate);
- 4) Credit Card Payment Form PTO-2038 (1 page);
- 5) Revocation Of Power Of Attorney and Appointment Of New Power Of Attorney (1 page);
- Statement Under 37 CFR 3.73(b) (1 page); and
- Request For Three-Month Extension Of Time; and Response (18 pages).

If you have not received the total number of pages, please call the facsimile department at (248) 646-4300. Thank you.

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OFFICE CODE

Client Name:

Client/Matter Number: 46613-00018

Attorney Number: [1039] Secretary/Ext.: G. Poland/7522 **Matter Name:** Attorney Initials: CAP

No. of Pages: 26

Amount:

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		Application Number		09/913,118			
TRANSMITTAL FORM (to be used for all correspondence after initial filing)		Filing Date		November 5, 2001			
		First Named Inventor		Wolfgang Rasp			
		Art Unit		1713			
		Examiner Name		Peter D. Mulcahy			
Total Number of Pages in This Submission	n	Attorney Docket Nu	mber	46613-00018			
	ENCLOS	URES (check all th	at apply)				
Fee Transmittal Form Fee Attached	Drawing(s) prelated Papers	[After Allowance communication to Group Appeal Communication to Board of Appeals and Interferences			
Amendment / Reply	Petition			Appeal Communication to Group (Appeal Notice, Brief, Reply Brief)			
After Final	Petition to Convert a Provisional Application Power of Attorney, Revocation			Proprietary Information Status Letter			
Affidavits/declaration(s) Extension of Time Request	Change of Correspondence Terminal Disclaimer			Other Enclosure(s) (please identify below):			
Express Abandonment Request	press Abandonment Request Request			Statement Under 37 C.F.R. 3.73(b) (1 page); Credit Card Paymont Form PTO-2038 (1 page)			
Information Disclosure Statement CD, Number of CD(s)							
Certified Copy of Priority Document(s)		<u> </u>					
Response to Missing Parts/ Incomplete Application		_					
Response to Missing Parts							
under 37 CFR 1.52 or 1.53	<u> </u>						
SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT							
Firm Dictinson Wright PLLC or Craig A. Phillips Individual name							
Signature Craix Phillens							
Date March 30, 2005							
CE	RTIFICATE OF	TRANSMISSION	MAILIN	G			
I hereby certify that this correspondence is being facsimile transmitted to the USPTO or deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to: Commissioner for Patents, P.O. Box 1450. Alexandria, VA 22515-1450 on the							
Typed or printed name Gail Poland							
Signature	ロボが0~	12	Date	March 30, 2805			

This collection of information is required by 37 CFR 1.5. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

Doc Code:

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Petent and Trademark Office; U.S. DEPARTMENT OF COMMERCE

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FEE TRANSMITTAL for FY 2005 Applicant olaims email entity status. See 37 CFR 1.27 TOTAL AMOUNT OF PAYMENT x> s \$1,020.00 Attorney Docket No. 46613-00018 METHOD OF PAYMENT (check all that apply)		Effective on 12/08/20		Complete if Known			n	
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Check Credit Card Money Order None Other (please identify):	Applicant clain	ns small entity status	5. See 37 CPR 1.27	Art Unit	1713			
Check Credit Card Money Order None Other (please identify):	TOTAL AMOU	NT OF PAYMENT	x > s \$1,020.00	Attorney Dock	et No. 46613	-00018		
Deposit Deposit Account Number: 04-1061 Deposit Account Name: Dickinson Wright PLLC For the above-identified deposit account, the Director is hereby suthorized to: (check all that apphy) Charge fee(s) indicated below	METHOD OF P	AYMENT (check all	that apply)					
For the above-identified deposit account, the Director is hereby euthorized to: (check all that apphy) Charge fee(s) indicated below	☐ Check	Credit Card	Money Order	ne 🔲 Oth	er (please identify)):		
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SUBMITTED BY								
Signature Registration No. 47,858 Telephone 248-433-7231		- mind			47,858	Telephone	248-433-7231	
Name (Print/Type) Craig A. Phillips Date March 30, 2005	Name (Print/Type)					Date	March 30, 2005	

This collection of information is required by 37 CFR 1.138. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by \$5 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 30 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450, DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1430, Alexandria, VA 22313-1450.

If you need assistance in completing the form, call 1-800-PTQ-9199 and select option 2.